

NEW OPTIONS FOR OFFENDERS WITH MENTAL AND SUBSTANCE USE DISORDERS (ALBANY COUNTY, NY)

Summer 2001/Revised Spring 2004

The Albany County Correctional Facility is the fifth largest county jail in New York State. Its 1,005-bed capacity has increased from 350 beds in 1989. The average daily inmate census in 2000 was 719; the average daily census of inmates with diagnosed mental illness for the same year was 63, up from 37 in 1994.

In January 1997, the National GAINS Center supported a team of professionals from the Albany County Correctional Facility (ACCF); the Office of the Public Defender of Albany County; and the Alcohol and Drug Services Division of the Albany County Department of Mental Health, to attend a three-day GAINS Regional Forum in Austin, Texas. The Forum, attended by representatives from 11 jurisdictions across the US, provided a vehicle for teams to identify gaps and chart goals to improve services for people with co-occurring disorders within their county's justice system.

On the plane ride home, the Albany County attendees, spurred by the realization that they had to involve many departments in the County to provide a streamlined and practicable continuum of services for offenders with health, mental, and/or substance use disorders, began drafting a letter to the Albany County Executive. The letter summarized the objectives the team had outlined at the Regional Forum, including the formation of a committee to address these issues.

"GAINS Team" Becomes The Options Committee

Less than a year later, the GAINS Regional Forum team had evolved into the fledgling 15- to 20-member Options Committee. The Committee established a mission that continues to guide it:

The ... Committee is committed to reviewing the existing systems that provide services to people who demonstrate a health, mental health, and/or substance abuse disorder and are involved in the correctional system. The committee will manage the integration of existing health, mental health, substance abuse and social service systems in order to match client needs with available services and improve client outcomes related to self-sufficiency and a reduction in recidivism.

Options Committee members include representatives from the ACCF; the County Sheriff's Department; the County Executive's Office; the County Departments of Health, Mental Health, Probation, and Social Services; the County Office of the Public Defender; the New York State Division of Parole; and Prison Health Services, Inc. In years past, Corrections and Mental Health didn't gel, nor did Corrections and Criminal Defense; today the environment is conducive to good communication and effective collaboration. Members of the Committee are client-focused, and the issues that arise are client-related rather than turf issues. Informal communications links have evolved; Committee members are comfortable picking up the phone and calling one another for assistance—even at home.

The Options Committee has continued to benefit from the support of the National GAINS Center. The GAINS Center has sponsored or co-sponsored cross-jurisdictional site visits and provided information regarding grant opportunities. The GAINS Center, and, in one instance, the National Commission of Corrections, has supported Ed Szostak, Superintendent of ACCF, and other members of the Committee to travel to correctional facilities in Hampden County, Massachusetts; Lucas County, Ohio; and Kings County, Washington. Committee members have worked to model best practices they have observed elsewhere for the Albany facility. In April 2000, representatives of the Options Committee were invited by the GAINS Center to present the Committee's achievements at the first National Mental Health conference held in Miami, Florida.

Committee Brings About Positive Change

The efforts of the Options Committee have enhanced existing programs, revived inactive programs and fostered constructive change generally.

- ❑ **New Treatment Options** A 16-bed residential addiction treatment program for male inmates, Intensive Corrections Addiction Residential Education (ICARE), was re-instituted at ACCF in 1997. In 2001, ICARE expanded to include an eight-bed residential treatment program for women.

- ❑ *Daily Rounds* The Options Committee has ensured the advancement of the Special Needs Program at ACCF. An element of the Program that consumes little staff time and yet has proven invaluable is the daily rounds. Mental health and medical staff conduct visits in the special needs tiers (men's tier, women's tier, pregnant women's tier, and infirmary) seeking to learn if any of the inmates has a concern that hasn't been addressed. Inmates have responded favorably by working in partnership with the mental health and medical providers; they are more likely to participate in their health care and to be receptive to their discharge plan.
- ❑ *Integration of Care* Medical and mental health providers at ACCF work increasingly as a team; close cooperation has resulted in the merging of medical and psychiatric records and the development of integrated care.
- ❑ *Increased Staffing/Staff Training* The efforts of Options Committee members have been instrumental in the hiring of a certified alcohol and substance abuse counselor at ACCF. Increased staffing of mental health providers generally has resulted in a full-time weekday and part-time weekend presence of mental health providers, with access to care available during off hours. In addition, all staff who have contact with mentally ill inmates receive training that covers interacting with this population and suicide prevention.
- ❑ *Intake Screening* Inmates are screened for medical and psychiatric status within hours of admission and, if care is indicated, referred to the appropriate provider(s). The aim is to provide consistent, coherent treatment during incarceration and to obtain information so that a service plan is in place to address discharge needs.
- ❑ *Coordinated Discharge Planning* The mental health discharge plan ensures the following provisions as necessary: residential placement (or verifiable residence); carry-over medication until Medicaid benefits are obtained; outpatient day treatment; referral to support group(s); transportation to services; family support; referral to physician; release for physician's office to verify appointment, and release of medical records to physician. Health care workers and other staff, including at times corrections officers, work as a team to improve the quality of life for inmates being discharged.
- ❑ *Pre-Trial/Pre-Sentencing Diversions* Mental health discharge plans have been used very successfully as pre-trial diversions. As the alternative sentencing coordinator for the Office of the Public Defender

noted, "We're only as good as the plan is for the person to return to the community. If we don't get a discharge plan or pre-trial discharge plan ahead of time, then it will serve as a discharge plan for sentencing. But the quicker we get it, the quicker the intervention [especially at the lower court level]."

- ❑ *Obtaining Grants* The Options Committee has been effective in obtaining grants. In November 2000, the Mental Health Association of New York State, Inc., announced the awarding of a \$150,000 federal grant from the Center for Mental Health Services. Monies were used to fund a one-year planning phase for a program to divert persons with mental illness from the ACCF to the mental health system; the program's structure was modeled on a program in Jacksonville, Florida.
- ❑ *Monetary Savings* The ACCF has experienced savings of approximately 1.4 million dollars over two years by utilizing increased discharge planning and case management efforts. Cost analysis includes on site and off site care.

Maintaining Momentum

The Options Committee continues to work within its mission as it moves forward with new projects.

- ❑ *Resource Manual* A recent project of the Options Committee was the development of a resource manual describing the services available to the subgroups within the jail population. The manual has been distributed to all county legislators.
- ❑ *Expanded Membership* The Committee decided to recruit representatives from the district attorney's office and county court judges.
- ❑ *National Recognition* The Committee worked to achieve renewed accreditation for ACCF by the County Correctional Accreditation Program of New York State in 2001 and strove to achieve accreditation by the National Commission on Correction Health Care, also in 2001.

Within its first few years, the ACCF Options Committee achieved recognition in Albany County and beyond as a progressive policymaking body. Its projects receive the enthusiastic support of the Albany County Sheriff, the County Executive, and the County Legislature.

The suggested citation for this fact sheet is National GAINS Center for People with Co-Occurring Disorders in the Justice System. (2001) *New options for offenders with mental and substance use disorders (Albany County, NY)*. Fact Sheet Series. Delmar, NY: Author.

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